Raintree Villa's Owners Assoc.

# Deck or Patio
## Improvement Application

**Office Use Only**
DATE RECEIVED:_____
RECEIVED BY:_____
PLOT PLAN ATTACHED ☐
CITY PERMIT ATTACHED ☐

| APPLICATION FOR: | Deck: ☐ New ☐ Replace | Patio: ☐ New ☐ Replace |
|---|---|---|

**RESIDENT INFORMATION**

| First Name: | Last Name: | Lot #: | Date: |
|---|---|---|---|
| Address: | Email: | Phone: | |

**IMPROVEMENT DETAILS**

| TYPE OF MATERIAL TO BE USED: | Deck Elevation: |
|---|---|
| DIMENSIONS<br>Width: Length: | Deck Railing Height: |
| Name of Contractor/Company: | |
| BEGINNING DATE OF IMPROVEMENT:<br>*(No earlier than date of approval)* | COMPLETION DATE:<br>*(No longer than 6 months after date of approval)* |

By signing below, I have given permission for the RLPOA Codes Administrator to enter my property to do the following: 1) Take a picture for the ARB Committee approval meeting 2) Inspect compliance of project after completion.

- ☐ **I have included an approved application from the City of Lee's Summit's Board of Zoning.**
- ☐ **I have included a plot plan showing all pool and fence specs and their respective locations.**
- ☐ **I understand I am responsible for my contractor's adherence to ARB guidelines.**

**Does contractor plan to cross common ground with equipment? ☐ Yes ☐ No**

**SIGNATURE OF APPLICANT**

_____

***** COMMITTEE USE ONLY *****

**1st Submission:** ☐ **APPROVED** ☐ **DECLINED**

**ARB COMMITTEE MBR SIGNATURES:**

| | | | | |
|---|---|---|---|---|
| Name: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |
| Name: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |
| Name: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |
| ARB CHAIR: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |

IF DECLINED, REASON:

IF EXCEPTION MADE FOR APPROVAL, REASON:

**2nd Submission:** ☐ **APPROVED** ☐ **DECLINED**

| | | | | |
|---|---|---|---|---|
| Name: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |
| Name: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |
| ARB CHAIR: | ☐ APPROVED | ☐ DECLINED | Signature: | Date: |

Raintree Villa's Approval

ARB Chair Name: _____ Signature:_____

REVISED: 4/8/22